

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

9/920607

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1		2		2		
2		2		2		
3		2		2		
4		2		2		
5		2		2		
6		2		2		
7		2		2		
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20		2		2		
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22		2		2		
23		2		2		
24		2		2		
25		2		2		
26		2		2		
27		2		2		
28		2		2		
29		2		2		
30		2		2		
31				1		
32				1		
33				1		
34				1		
35				1		
36				1		
37				1		
38				1		
39				1		
40				1		
41				1		
42				1		
43				1		
44				1		
45						
46						
47						
48						
49						
50						
TOTAL IND.	10		10			
TOTAL DEP.	176		190			
TOTAL CLAIMS	186		200			

50

	*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
52						
53						
54						
55						
56						
57						
58						
59						
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61						
62						
63						
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95						
96						
97						
98						
99						
100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMEENDMENTS

Pg. 2.

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CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/		/			
2		/		/		
3		/		/		
4		/		/		
5		/		/		
6		/		/		
7		/		/		
8		/		/		
9		/		/		
10		/		/		
11		/		/		
12		/		/		
13		/		/		
14	/		/			
15		/		/		
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18		/		/		
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30		/		/		
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41		/		/		
42		/		/		
43		/		/		
44		/		/		
45		/		/		
46		/		/		
47		/		/		
48		/		/		
49		/		/		
50		/		/		
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

46
76
60
176

	*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51		/		/		
52	/		/			
53		/		/		
54		/		/		
55		/		/		
56		/		/		
57		/		/		
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59		/		/		
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66		/		/		
67	/		/			
68	/		/			
69	/		/			
70		/		/		
71		/		/		
72		/		/		
73	/		/			
74	/		/			
75		2		2		
76		2		2		
77		2		2		
78		2		2		
79		2		2		
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82		2		2		
83		2		2		
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90		2		2		
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92		2		2		
93		2		2		
94		2		2		
95		2		2		
96		2		2		
97		2		2		
98		2		2		
99		2		2		
100		2		2		
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

46

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADIMENDMENTS

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